PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Numbe

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	112079174											
CLAIMS AS		S FILED - PART I (Column 1)		(Column 2)		_	SMALL ENTITY TYPE		OR	OTHER SMALL		
TOTAL CLAIMS		111					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		* 21			X\$ 9=		OR	X\$18=	378
INDEPENDENT CLAIMS			/0 minus 3 =		* 5		ľ	X42=		OR	X84=	2.88
MU	LTIPLE DEPENI	DENT CLAIM P	RESENT					+140=	<u></u>	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	į	TOTAL		OR	TOTAL	1706
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						(Column 3)		SMALL E	ENTITY	OR	OTHER SMALL	THAN
		(Column 1) CLAIMS			IEST	(30.0.1111 0)	ſ		ADDI-			ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
N P	Total	· U3	Minus	** 4	//	= 2		X\$ 9=		OR	X\$18=	3600
AME	Independent	. 12	Minus	*** _	<u>Ø</u>	= 2		X42=		OR	X84=	168.00
L	FIRST PRESE	NTATION OF M				V		+140=		OR	+280=	
BEST AVAILABLE COPY							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	703
		(Column 1)		(Colu	mn 2)	(Column 3)	1 -					
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIL	=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENUEN	I CLAIM		'	+140=		OR	+280=	
							1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)	•					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***]=		X42=		OR	X84=	
	FIRST PRESE	ENTATION OF N	NULTIPLE DE	PENDE	NT CLAIM]			1 "	·	
		4.1	Ab	h.ma 0	ita "0" ia a	olumn 3		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										<u> </u>		
1	The #1 Bab and bloom		aid For" (Total	or Indoner	dent) is th	e highest numbe	er fo	und in the ac	propriate be	ox in c	olumn 1.	